July Mary Town Town

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## **FACSIMILE TRANSMITTAL**

TO

U.S. Patent and Trademark Office

Fax No.: 703 872 9306 Phone No.: 703 308 1202

Subject:

Power of Attorney

FROM

Name: Lauren L. Stevens

Reg. No. 36,691

Phone No.: 650 849 6614

Fax # Verified by: smb

# Pages (incl. this): 4

Date: June 21, 2004

Confirmation Copy to Follow: No

## Message:

In re Patent of James H. Sabry et al. Patent No. 6,743,576

(from Application No. 09/311,890)

Issued: June 1, 2004

or: DATABASE SYSTEM FOR PREDICTIVE CELLULAR

BIOINFORMATICS

Applicants enclose the following papers for filing in the above-referenced application:

- 1) Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address (1 page);
- 2) Statement under 37 CFR 3.73(b) (1 page); and
- 3) Schedule A (1 page).

If there is a problem with this transmission, notify fax room at (650) 849-6600 or the sender at the number above.

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PTO/\$B/82 (09-03)

## Application Number **REVOCATION OF POWER OF** Filing/ Issue Date As set forth on the attached ATTORNEY WITH Schedule A **NEW POWER OF ATTORNEY** AND Attorney Docket Number CHANGE OF CORRESPONDENCE ADDRESS

I hereby revoke all previous powers of attorney given in the above-identified application:							
A Power of Attor	ney is submitted herewith.						
OR							
I hereby appoint the practitioners associated with the Customer Number:     22,852							
Please change the correspondence address for the above-identified application to:							
The address associated with Customer Number: 22,852							
OR							
☐ Firm <i>or</i> Individual Name							
Address		· · · · · · · · · · · · · · · · · · ·					
Address							
City		State	ZIP				
Country							
Telephone		Fax					
I am the:							
Applicant/inventor.							
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Name Robert I. Blum							
Signature							
Date	6-16-04		50 624300C				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
more than one signature is required, see below.							

PTO/\$8/96 (08-03)

Attorney Docket No.

	STATEMENT UNDER 37 CFR 3.73(b)					
Applicant/Patent Owner: Cytokinetics, Inc.						
Application No./Patent No.: As set forth on attached Schedule A Filed/Issue Date: As set forth on attached Schedule A						
Cytokinetics, Inc.	, a <u>Delaware corporation</u>					
(Name of Assignes)	(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)					
states that it is:						
1. 🔀 the assignee of the en	tire right, title, and interest; or					
The extent (by, percen	2. an assignee of less than the entire right, title and interest.  The extent (by, percentage) of its ownership interest is%					
in the patent application/patent iden	ntified above by virtue of either:					
A. An assignment from the inverse recorded in the United States was recorded as set forth on	antor(s) of the patent application/patent identified above. The assignment was s Patent and Trademark Office. A copy of the assignment is attached hereto, or the attached Schedule A.					
OR						
shown below:	ntor(s), of the patent application/patent identified above, to the current assignee as					
1, From:	To : proded in the United States Patent and Trademark Office at					
The document was reco	orded in the United States Patent and Trademark Office at					
Reel, Frame	, or for which a copy thereof is attached.					
2. From:	To :					
The document was reco	orded in the United States Patent and Trademark Office at					
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3, From:	To :					
The document was reco	orded in the United States Patent and Trademark Office at					
Reel, Frame, or for which a copy thereof is attached.						
Additional documents in	n the chain of title are listed on a supplemental sheet.					
Copies of assignments of other	er documents in the chain of title are attached.					
	the original assignment document or a true copy of the original document) ont Division in accordance with 37 CFR Part 3, if the assignment is to be					
The undersigned (whose title is su	applied below) is authorized to act on behalf of the assignee.					
6-16-04 Date 650 624 30	Robert I. Blum					
Date	Typed or printed name					
650 624 30	000					
Telephone num	iber Signawre					
·	Title					

SCHEDULE A for Transfer USPTO Formal Documents							
Attorney Docket	Application Number	Filing Date	Priority Information	Assignment Information			
09367.0045.00000		05/14/99	NA	009969/0312			